# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee (Summary Page)

RECEIVED FEDERAL ELECTION DOMISISSION MAIL ROOM

(all in the second		- r	escate \$10	ы ман волм
1. NAME OF COMMITTEE (in full)		Ų	แก้เกิดจีเ	MAIL ROOM
Erie Indemnity Company PAC - Federal		2. FEC ID	ENTIFIC/	TION NUMBER
ADDRESS (number and street)		<u> </u>	100000013	1997 (
100 Erie Insurance Place previously	y reported	. –		e has qualified
CITY, STATE and ZIP CODE		as a multicandidate committee		
Erie, PA 16530		(se	e FEC FO	PRIM TIM)
4. TYPE OF REPORT				
	Report Due	_		<b>-</b>
L Liuly 15 Quadedy Report	ti <b>ary 20</b> :h 20	☐ June 20☐ July 20☐	)	☐ October 20 ☐ November 20
☐ October 15 Quarterly Report ☐ April		August	20	December 20
☐ January 31 Year End Report ☐ May	20	Septem	ber 20	☐ January 31
☐ July 31 Mid-Year Report ☑ Tweifth of (Non-election Year Only)		_	_	PRIMARY
election	on <u>04-0</u>	<u>4-00</u> in the	State of	PA
☐ Termination Report ☐ Thirtieth	day report f	allowing the	General E	Election on
<u> </u>	ir	the State o	of	
(b) Is this Report an Amendment?   YES  NO				
SUMMARY 5. Covering Period 01-01-00 through 03-15-00		LUMN A is Period	Çalen	COLUMN B dar Year-to-Date
6. (a) Cash on Hand January 1, 19 00	* : : : : : : : : : : : : : : : : : : :	× \$1.	200 A	\$2,427.87
(b) Cash on Hand at Beginning of Reporting Period	********	\$2,427.8	7 *************************************	
(c) Total Receipts (from Line 19)		\$1,088.7	0	\$1,068,70
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$3,496.5	7	\$3,496.67
7. Total Disbursements (from Line 30)				
Cash on Hand at Close of Reporting Period     (subtract Line 7 from Line 6(d))		\$3,496.5	7	\$3,496.67
9. Debts and Obligations Owed TO the Committee			Fede	ral Election
(Itemize all on Schedule C and/or Schedule D)		_		Commission E Street, NW
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	Ì		Wasi	hington, DC 20463
I certify that I have examined this Report and to the best of and belief it is true, correct and complete.	edge		ree 800-424-9530   202-219-3420	
Type or Print Name of Treasurer Jan R. Van Gorder	_		-	
Signature of Treadurer	_		Di	ate 3 / 16 /00
Submission of false, erroneous, or incomplete information	may subject	signer to p	enallies of	f 2 U.S.C.437g.
	<del></del>	1		FEC FORM 3X
				I .

## DETAILED SUMMARY PAGE of Receipts and Disbursements Page 2, FEC FORM 3X

NAME OF COMMITTEE  Erle Indemnity Company PAC - Federal	REPORT COVER FROM 01-01-00	ING PERIOD TO: <b>03-15-00</b>	
, Receipts	COLUMN A	COLUMN B	
11. Contributions (other than leans) From:	Total This Period	Calendar Year	
a. Individuals/Persons Other Than Political Committees			
i. Itemized (Use Schedule A)	\$230.80	\$230.80	11a
ii. Unitemized	\$637.90	\$837.90	11a
ill. Total (add I and ii) >	\$1,068.70	\$1,068.70	11ai
b. Political Party Committees	0	Ď	11()
c. Other Political Committees (such as PACs)	0	D	11(
d. Total Contributions (add a III, b and c) >	\$1,068.70	\$1,068.70	110
12. Transfers From Affiliated/Other Party Committees	0	0	12
13. All Loans Received	0		13
14. Loan Repayments Received	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	Ō	15
16. Refunds of Contributions Made	0	0	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0	C	17
18. Transfers from Nonfederal Account for Joint Activity	0	0	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	\$1,06B.70	\$1,068.70	19
20. Total Federal Receipts (subtract line 18 from line 19) >	\$1,068,70	\$1,068.70	T
			1
II. Disbursements			
21. Operating Expenditures:			•
<ul> <li>a. Shared Federal/Non-Federal Activity (from Schedule H4)</li> </ul>		ام	   21a
i. Federal Share	0	- 0	218
II. Non-Federal Share	<u> </u>		21(
b. Other Federal Operating Expenditures	0		21(
c. Total Operating Expenditures (add a i, a ii, and b) >	0		22
22. Transfers to Affiliated/Other Party Committees	0		23
23. Contributions to Federal Candidates and Political Committees	- 0	<del></del> -	-
24. Independent Expenditures (use Schedule E)	<u> </u>	<u> </u>	25
25. Coordinated Expenditures by Party Committees (Schedule F)	<u></u>		1 <u>2</u> 6
26, Loan Repayments Made	- 5	- 0	٠.,
27. Loans Made			┨╴.
28. Refunds of Contributions To:			28
a. Individuals/Persons Other Than Political Committees	<del></del>		28
b. Political Party Committees	- 0	- <u>-                                  </u>	-1
c. Other Political Committees (such as PACs)	0	<u> </u>	4
29. Other Disbursements	0		■
30. Total Disbursements (21c+22+23+24+25+26+27+28d+29) >	0	0	-
30. Total Disbursements (subtract line 21ali from line 30) >	0	0	$\dashv$
		<u> </u>	7
III. Net Contributions/Operating Expanditures			
32. Total Contributions (other than loans)(from line 11d)	\$1,088.70	\$1,068.70	٠.
33. Total Contribution Refunds (from line 28d)	0	0	133
34. Net Contributions (other than loans)(subtract line 33 from 32)	\$1,068 <u>.70</u>	\$1,068.70	_
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	. 0	. 0	_
36, Offsets to Operating Expenditures (from line 15)	0		36
37. Net Operating Expenditures (subtract line 36 from 35) >	0	0	] 37

PAGE	1	ÖF	1
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444-1511			

SCHEDULE A ITEMIZED RECEIPTS Contributions from Individuals/Persons Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it. NAME OF COMMITTEE (in Full) C00153577 Erie Indemnity Company PAC - Federal Amount this pd. A. Full Name, Mailing Address and ZIP Code Name of Employer Date John J. Brinling Jr. Érie Insurance Group 5691 Culpepper Drive 01-17-00 \$116.40 Erie, PA 18606 02-29-00 \$116.40 Occupation Receipt For: T Primary Executive Vice Pres. General Other (specify): \$230.80 Year-to-Date > Amount this pd. B. Full Name, Mailing Address and ZIP Code Name of Employer Date Occupation Receipt For: Primary ☐ General Year-to-Date > Other (specify): C. Full Name, Mailing Address and ZIP Code Date Amount this pd. Name of Employer Occupation Receipt For: Primary ☐ General Other (specify): Year-to-Date > Date Amount this pd. D. Full Name, Mailing Address and ZIP Code Name of Employer Occupation Receipt For: Primary General Other (specify): Year-to-Date > Date Amount this od. Name of Employer E. Full Name, Mailing Address and ZIP Code Occupation Receipt For: Primary ☐ Generat Other (specify): Year-to-Date > Amount this pd. F. Full Name, Mailing Address and ZIP Code Name of Employer Date Occupation Receipt For: Primary ☐ General Other (specify): Year-to-Date > Amount this pd. G. Full Name, Mailing Address and ZIP Code Name of Employer Date Occupation Receipt For: Primary ☐ General Other (specify): Year-to-Date > \$230.80 \$230.80 

## SCHEDULE A

### ITEMIZED RECEIPTS

PAGE	1	OF	3
FOR LI	NE N	UMBE	R
	46-11	l Ele	

Unitemized Contributions from Individuals/Persons Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it. NAME OF COMMITTEE (in Full) C00163577 Erie Indemnity Company PAC - Federal A. Full Name, Mailing Address and ZIP Code Amount this pd. Name of Employer Date Jonathan G. Alfred Erie insurance Group 01-17-00 900 Summers Street \$10.48 Parkersburg, WV 26101 02-29-00 \$10.48 Occupation: General Receipt For: Primary Investigator Other (specify): Year-to-Date > \$20.96 Amount this pd. Name of Employer Date B. Full Name, Mailing Address and ZIP Code Eria Insurance Jav H. Beck Group 362 Federal Circle 01-17-00 \$11.10 Delaware, OH 43015 02-29-00 \$11.10 Occupation District Sales Mgr. Receipt For: Primary General: Other (specify): Year-to-Date > \$22,20 Amount this pd. Name of Employer Date C. Full Name, Mailing Address and ZIP Code Erie Insurance Kevin L. Bond Group \$11.82 01-17-00 910 Yellow Lake Drive \$11.62 Fort Wayne, IN 46804 02-29-00 Occupation Receipt For: Primary ☐ General Supervisor Other (specify): \$23.64 Year-to-Date > Amount this pd. D. Full Name, Mailing Address and ZIP Code Name of Employer Date Eria Insurance Jeffrey W. Brinling Group 01-17-00 514.85 13190 Fem Avenue, N.W. \$15.28 02-29-00 Hartville, OH 44632 Occupation Branch Sales Manager Receipt For: Primary □ General \$30.13 Other (specify): Year-to-Date > E. Full Name, Mailing Address and ZIP Code Susan Burgess-Demarco Amount this pd. Date Name of Employer Erie Insurance Group \$12.10 1843 Dorset Drive 01-17-00 \$11.54 02-29-00 Roanoke, VA 24018 Occupation Receipt For: Primary Supervisor General \$23.64 Other (specify): Year-to-Date > Amount this pd. F. Full Name, Mailing Address and ZIP Code Joseph W. Deno Date Name of Employer Erie Insurance Group D1-17-00 \$8,48 3098 Penrose Place \$8.48 D2-29-00 Gincinnati, OH 45211 Occupation Claims Administration Receipt For: Primary ☐ General \$16.96 | | Other (specify): Year-to-Date > Date Amount this pd. G. Full Name, Mailing Address and ZIP Code Douglas N. Fitzgerald Name of Employer Ene Insurance Group 01-17-00 \$63.62 2311 Wedgawood Way York, PA 17404 02-29-00 \$63,62 Occupation Receipt For: Primary Regional Vice Pres. General \$127.24 Other (specify): Year-to-Date > \$264.77 

## PAGE SCHEDULE A ITEMIZED RECEIPTS FOR LINE NUMBER Unitemized Contributions from Individuals/Persons 11(a)(II) Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

2 OF

NAME OF COMMITTEE (in Full)  Erie Indemnity Company PAC - Federal	C00163677		
A. Full Name, Mailing Address and ZiP Code David C. Froelich 8019 Glendevan Street, N.W.	Name of Employer Erie Insurance Group	Date 01-17-00	Amount this pd. \$9.20
Massillon, OH 44646  Receipt For: Primary General	Occupation 02-29-00 AVP & Claims Manager		\$9.20
Other (specify):	Year-to-Date > \$1	8.40	·····
B. Full Name, Mailing Address and ZIP Code Terry L. Hamman 3020 Atoll Drive	Name of Employer Eria Insurance Group	Date 01-17-00	Amount this pd. \$51.18
Lawis Center, OH 43036  Receipt For: Primary General	Occupation Regional Vice Pres.	02-29-00	\$51.18
Other (specify):	Year-to-Date > \$1	02.36	
C. Full Name, Mailing Address and ZIP Code Larry J. Hasbrouck 8330 Ironclad Drive	Name of Employer Erie Insurance Group	Date 01-17-00	Amount this pd. \$13.84
Mechanicsville, VA 23111 Receipt For: Primary General	Occupation Supervisor	02-29-00	\$12.64
Other (specify):	Year-to-Date > \$2	27.68	
D. Full Name, Mailing Address and ZIP Code Edman E. Llewellyn Jr. Route 2, Box 474	Name of Employer  Erie Insurance  Group	Date 01-17-00	Amount this pd. \$12.64
Ridgeley, WV 26763  Receipt For: Primary General	Occupation Claims Administration	02-29-00	\$12.64
Other (specify):	Year-to-Date > \$3	25.28	
E. Full Name, Mailing Address and ZIP Code John Machmer 4873 East Main Street, #36	Name of Employer Erie Insurance Group	Date 01-17-00	Amount this pd. \$19.56
Whitehall, OH 43213  Receipt For:  Primary General	Occupation Supervisor	02-29-00	\$19.56
Other (specify):	Year-to-Date > \$	39.12	
F. Full Name, Mailing Address and ZIP Code Robert F. Morgan Jr. 1672 Buckshot Court	Name of Employer Erie Insurance Group	Date 01-17-00	Amount this pd.
Worthington, OH 43055  Receipt For: Primary General	Occupation VP & Claims Manager	02-29-00	\$21.50
Other (specify):	Year-to-Date > \$	41.60	
G. Full Name, Mailing Address and ZIP Code Jerrold V. Murphy 1215-20 Street	Name of Employer Erie Insurance Group	Date 01-17-00	Amount this pd.
Vienna, WV 28105  Receipt For: Primary General	Occupation VP & Branch Manager	02-29-00	\$41.60
Other (specify):	Year-to-Date > \$	63.60	j
SUBTOTAL of Receipts This Page (optional)	\$337.94		
TOTAL This Period (last page this line number only			

PAGE	3	ŎF	3
FOR LINE NUMBER			
44/a)/(i)			

# SCHEDULE A ITEMIZED RECEIPTS Unitemized Contributions from Individuals/Persons

Unitemized Contributions from Individua	als/Persons	1.3	11(a)(li)	
nformation copied from these Reports may not be s	old or used for soliciting co	entributions or	r commercial	
ourposes, other than using the name and address of NAME OF COMMITTEE (in Full) Erle Indemnity Company PAC - Federal	f a political committee to se C00153577	olicit cominaut	jions from it.	
A. Full Name, Mailing Address and ZIP Code Stacey E. Nicholson 1175 Bay Ridge Road	Name of Employer Erie Insurance Group	Date 01-17-00	Amount this pd. \$29,36	
Annapolis, MD 21403  Receipt For: Primary General	Occupation Branch Sales Manager			
Cther (specify):	Year-to-Date > \$	58.72		
B. Full Name, Mailing Address and ZIP Code Lee E. Oakes 7030 Birchbark Lane	Name of Employer Eris Insurance Group	Date 01-17-00	#12.56	
Machanicsville, VA 23116  Receipt For: Primary General	Occupation Mat Dam & Salv Spec	02-29-00	\$12.56	
Other (specify):		25.12		
C. Full Name, Mailing Address and ZIP Code Gerard J. Quinn 7 Whittier Heights	Name of Employer Erie Insurance Group	Date 01-17-00	Amount this pd. \$11.38	
Hagerstown, MD 21742 Receipt For: Primary General	Occupation Supervisor	02-29-00	\$11.38	
Other (specify):	Year-to-Date >	Year-to-Date > \$22.76		
D. Full Name, Mailing Address and ZIP Code Nell S. Smith 3830 Gap Mountain Road	Name of Employer Erie Insurance Group	Date 01-17-00	Amount this pd. \$12.17	
37745, TN 37745  Receipt For: Primary General	Occupation District Sales Mgr.	02-29-00	\$11.94	
Other (specify):	Year-to-Date >	24.11		
E. Full Name, Mailing Address and ZIP Code Randall L. Snow 6945 Brahma Road, S.W.	Name of Employer Erie Insurance Group	Date 01-17-00	Amount this pd. \$9.08	
Roanoke, VA 24018  Receipt For: Primary General	Occupation Litigation Spec.	02-29-00	\$9.08	
Other (specify):	Year-to-Date >	\$18,18	<u> </u>	
F. Full Name, Mailing Address and ZIP Code Wayne A. Willette 168 Prospect Hill Road	Name of Employer Ene Insurance Group	Date 01-17-00	Amount this pd. \$12.14	
Horseheads, NY 14845 Receipt For: Primary General	Occupation Claims Manager	02-29-00	\$12.14	
Other (specify):	Year-to-Date >	\$24.28		
G. Full Name, Mailing Address and ZIP Code Eric D. Root 62 Belleclaire Drive	Name of Employer Erle Insurance Group	Date 01-17-00	Amount this pd. \$31.02	
Rochester, NY 14617  Receipt For: Primary General	Occupation Branch Manager	D2-29-00	\$31.02	
Other (specify):	Year-to-Date >	<b>\$</b> 62.04		
SUBTOTAL of Receipts This Page (optional)			\$235,19	
TOTAL This Period (last page this line number onl	y)	, >	\$837.90	

SCHEDULE H1

## METHOD OF ALLOCATION FOR SHARED FEDERAL AND NON-FEDERAL ADMINISTRATIVE EXPENSES AND GENERIC VOTER DRIVE COSTS

NAME OF COMMITTEE  Erie Indemnity Company PAC - Federal	
NATIONAL PARTY COMMITTEES  FIXED FEDERAL PERCENTAGE (Check the appropriate line and enter % in box to right)  PRESIDENTIAL YEAR (65%)  ALL OTHER YEARS (80%)	
HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES  MINIMUM FEDERAL PERCENTAGE (65%) (If checked, enter 65% in box to right) OR	
FUNDS EXPENDED:  o ESTIMATED DIRECT CANDIDATE SUPPORT - FEDERAL  o ESTIMATED DIRECT CANDIDATE SUPPORT NON-FEDERAL	
ADJUSTMENTS TO FUNDS EXPENDED:  ACTUAL DIRECT CANDIDATE SUPPORT FEDERAL	
NOTE: Funds expended must be used if the Federal Proportion is greater than 65% in any year.	ar.
SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES  FUNDS EXPENDED:  o ESTIMATED DIRECT CANDIDATE SUPPORT FEDERAL  o ESTIMATED DIRECT CANDIDATE SUPPORT NON-FEDERAL  ADJUSTMENTS TO FUNDS EXPENDED:  ACTUAL DIRECT CANDIDATE SUPPORT FEDERAL	
ACTUAL DIRECT CANDIDATE SUPPORT - NON-FEDERAL  STATE AND LOCAL PARTY COMMITTEES	
BALLOT COMPOSITION  CHECK ALL OFFICES APPEARING ON THE NEXT GENERAL ELECTION BALLOT:  NUMBER OF  POINTS	]
1. PRESIDENT	- -
4. SUBTOTAL FEDERAL (ADD 1, 2, AND 3)	-
5. GOVERNOR	
11. SUBTOTAL NON-FEDERAL (ADD 5, 6, 7, 8, 9, AND 10)	·
FEDERAL ALLOCATION = LINE 4 DIVIDED BY LINE 12	L

RECEIPT SCHEDULE H3 TRANSFERS FROM NON-FEDERAL ACCOUNTS				
NAME OF COMMITTEE	<u> </u>			FOR LINE 18 Total Amount
				Transferred
NAME OF ACCOUNT		DATI	E OF RECEIPT	
<u> </u>		N OF TRANSFER	RECEIVED	
	Admin/Voter Drive Amount	Direct Fund- raising Amount	Exempt Activity/Direct Candidate	
l) Total Administrative/Voter Drive			Support	
Direct Fundralsing (List Events-Amount)				
a)		_ <del></del> -		
b) c)				
a)				
e) Total Amount Transferred For Direct		ed ed : 00000033 :03 1 :02 · · · d	×*************************************	X
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)				
	***************************************	*****************	_	
b)			<u> </u>	
c)	***************************************			
d)	***************************************		<del></del> -	
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support				
NAME OF ACCOUNT		DAT	E OF RECEIPT	
	BREAKDOV	VN OF TRANSFE	RECEIVED	
	Admin/Voter	Direct Fund- raising Amount	Exempt Activity/Direct	
	Drive Amount	raising Amount	Candidate	***
i) Total Administrative/Voter Drive	×		Support	
ii) Direct Fundraising (List Events-Amount)				
a)				
b)		<u> </u>		
d)		<u> </u>		
e) Total Amount Transferred For Direct		337 -2 - 3-3 : 00000333885-		
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)				
a)				
b)				
c)				
d) e) Total Amount Transferred For Exempt				
Activity/Direct Candidate Support				
		reakdown of Tran		
	Admin/Voter Drive Amount	Direct Fund- raising Amount	Exempt Activity/DCS	
SUBTOTAL THIS PAGE	<u> </u>	-0-	-0-	-0-
TOTAL THIS PERIOD	-0-	-0-	-0-	-0-

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## Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS				
The Commission has added-this page to the end of this filing to Indicate how it was received.				
Hand Delivered	Date of Receipt			
First Class Mail	POSTMARKED			
Registered/Certified Mail	POSTMARKED 3/16/00			
No Postmark				
Postmark Illegible				
Received from the House office of Records and Registration	Date of Receipt			
Received from the Senate Office of Public Records	Date of Receipt			
Other ( Specify):	Postmerked			
· · · · · · · · · · · · · · · · · · ·	and/or Date of Receipt			
£lectronic Filing	•			
J.A.Q.	3/20/00			
PREPARER	DATE PREPARED			